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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/504,159	02/15/2000	Lalitha Vaidyanathan	1018-001US01	7527
28863	7590	01/16/2009		
SHUMAKER & SIEFFERT, P. A. 1625 RADIO DRIVE SUITE 300 WOODBURY, MN 55125			EXAMINER MOONEYHAM, JANICE A	
			ART UNIT 3689	PAPER NUMBER
			NOTIFICATION DATE 01/16/2009	DELIVERY MODE ELECTRONIC

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.

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**UNITED STATES PATENT AND TRADEMARK OFFICE**

**Board of Patent Appeals and Interferences**

SHUMAKER & SIEFFERT, P. A.  
1625 RADIO DRIVE  
SUITE 300  
WOODBURY, MN 55125

Appeal No: 2008-2537  
Appellant: Lalitha Vaidyanathan et al.  
Application No: 09/504,159  
Hearing Room: B  
Hearing Docket: B  
Hearing Date: Tuesday, March 17, 2009  
Hearing Time: 09:00 AM  
Location: Madison Building - East Wing  
600 Dulany Street, 9th Floor  
Alexandria, Virginia 22313-1450

**NOTICE OF HEARING  
CONFIRMATION REQUIRED WITHIN TWENTY-ONE DAYS**

Your attention is directed to 37 CFR § 41.47. The above identified appeal will be heard by the Board of Patent Appeals and Interferences on the date indicated. Hearings will commence at the time set and as soon as the argument in one appeal is concluded, the succeeding appeal will be taken up. The time allowed for argument is twenty minutes unless additional time is requested and permitted before the argument is commenced. If there are any inquiries, please contact the Clerk of the Board at 571-272-9797.

CONFIRMATION OR WAIVER OF THE HEARING IS REQUIRED. This form must be completed below and facsimile transmitted to both: (1) the USPTO Central fax number (official copy), and (2) the Board of Patent Appeals and Interferences fax number (courtesy copy) within TWENTY-ONE (21) DAYS from the mailing date of this notice indicating confirmation or waiver of the hearing. A copy of this notice may be alternately filed by mail if facsimile is not available.

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CHECK ONE: ( ) HEARING ATTENDANCE CONFIRMED ( ) HEARING ATTENDANCE WAIVED

\_\_\_\_\_  
Signature of Attorney/Agent/Appellant

\_\_\_\_\_  
Date

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Registration No.

Names of other visitors expected to accompany counsel: \_\_\_\_\_

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